



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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April 29, 2016

To: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of West Covina Foster Family Agency dba Homes of Hope, referred to as Casa Esperanza Treatment Center (The Group Home) in May 2015. The Group Home has one site located in the First Supervisorial District and provides services to the County of Los Angeles DCFS placed children and Probation placed youth. According to the Group Home's Program Statement, its stated purpose is "to provide quality residential foster care to minors who are unable to live with their families and instill hope, trust, joy and meaning in the lives of minors in their care."

The Group Home has a 6-bed site licensed to serve a capacity of 6 female children, ages 13 through 19. At the time of the review, the Group Home served four placed DCFS children. The placed children's overall average length of placement was five months and the average age was 15.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the Group Home, being provided with good care and appropriate services and being comfortable in their environment.

The Group Home was in full compliance with 7 of 10 areas of our Contract Compliance Review: Facility and Environment; Maintenance of Required Documentation and Service Delivery; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Discharged Children; and Personnel Records.

CAD noted deficiencies in areas of: Licensure/Contract Requirements, related to SIRs not timely submitted and Community Care Licensing (CCL) citations; Personal Rights and Social/Emotional Well-Being, related to children reporting that they are not treated with respect and dignity, a child reporting that she is not allowed to attend religious services of her choice, a child reporting that she did not know she could reject voluntary medical, dental and psychiatric care and a child reporting that she is not given an opportunity to plan activities; and Personal Needs/Survival and Economic Well-Being, related to a child reporting not being involved with the selection of their clothing.

Attached are the details of CAD's review.

REVIEW OF REPORT

On July 1, 2015, Matthew St. John, DCFS CAD and Kong Ng, DCFS Out-of-Home Care Management Division held an exit conference with Group Home representatives: Sukhwinder Singh, Executive Director; Pritpal Sidhu, Ph.D., Program Administrator and Maria Castaneda, Quality Assurance Supervisor. The Group Home representatives agreed with the review findings and recommendations were receptive to implementing systemic changes to improve compliance with regulatory standards and were in agreement with addressing the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the Auditor-Controller and CCL.

The Group Home provided the attached approved CAP addressing the recommendations noted in this report.

If you have any questions, your staff may contact me, or Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM:LTI:ms

Attachments

c: Sachi A Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin C. Remington, Interim Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Sukhwinder Singh, Executive Director, West Covina Foster Family Agency dba Homes of Hope
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Leonora Scott, Regional Manager, Community Care Licensing Division

**WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE
CASA ESPERANZA TREATMENT CENTER GROUP HOME
CONTRACT COMPLIANCE REVIEW SUMMARY**

**Rate Classification Level: 11
License No. 197804217**

| | Contract Compliance Review | Findings: May 2015 |
|-----|--|--|
| I | <u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation Needs Met 3. Vehicle Maintained In Good Repair 4. Timely, Cross-Reported SIRs 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Comprehensive Monetary and Clothing Allowance Logs Maintained 8. Detailed Sign-In/Out Logs for Placed Children 9. CCL Complaints on Safety/Plant Deficiencies | <ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed |
| II | <u>Facility and Environment</u> (5 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Well Maintained 3. Children's Bedrooms Well Maintained 4. Sufficient Recreational Equipment/Educational Resources 5. Adequate Perishable and Non-Perishable Food | Full Compliance (All) |
| III | <u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Capacity and Program Statement 2. DCFS Children's Social Worker's Authorization to Implement NSPs 3. NSPs Implemented and Discussed with Staff 4. Children Progressing Toward Meeting NSP Case Goals 5. Therapeutic Services Received 6. Recommended Assessment/Evaluations Implemented 7. DCFS Children's Social Workers Monthly Contacts Documented 8. Children Assisted in Maintaining Important Relationships 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation | Full Compliance (All) |

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| | 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation | |
| IV | <u>Education and Workforce Readiness</u> (5 Elements) <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three School Days 2. Group Home Ensured Children Attended School and Facilitated in Meeting Their Educational Goals 3. Current Report Cards/Progress Reports Maintained 4. Children's Academic Performance and/or Attendance Increased 5. Group Home Encouraged Children's Participation in YDS or Equivalent Services and Vocational Programs | Full Compliance (All) |
| V | <u>Health and Medical Needs</u> (4 Elements) <ol style="list-style-type: none"> 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely | Full Compliance (All) |
| VI | <u>Psychotropic Medication</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review | Full Compliance (All) |
| VII | <u>Personal Rights and Social/Emotional Well-Being</u> (13 Elements) <ol style="list-style-type: none"> 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. Group Home's efforts to provide Nutritious Meals and Snacks 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend or Not Attend Religious Services/Activities 9. Children's Chores Reasonable 10. Children Informed About Their Medication and Right to Refuse Medication | <ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance 10. Full Compliance |

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| | <ul style="list-style-type: none"> 11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in Extracurricular, Enrichment and Social Activities (Group Home, School, Community) 13. Children Given Opportunities to Participate in Extracurricular, Enrichment and Social Activities (Group Home, School, Community) | <ul style="list-style-type: none"> 11. Improvement Needed 12. Improvement Needed 13. Full Compliance |
| VIII | <p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ul style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children Involved in the Selection of Their Clothing 4. Provision of Clean Towels and Adequate Ethnic Personal Care Items 5. Minimum Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with a Life Book/Photo Album | <ul style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance |
| IX | <p><u>Discharged Children</u> (3 Elements)</p> <ul style="list-style-type: none"> 1. Children Discharged According to Permanency Plan 2. Children Made Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement | <p>Full Compliance (All)</p> |
| X | <p><u>Personnel Records</u> (7 Elements)</p> <ul style="list-style-type: none"> 1. FBI, DOJ, and CACIs Submitted Timely 2. Signed Criminal Background Statement Timely 3. Education/Experience Requirement 4. Employee Health Screening/TB Clearances Timely 5. Valid Driver's License 6. Signed Copies of Group Home Policies and Procedures 7. All Required Training | <p>Full Compliance (All)</p> |

**WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE
GROUP HOME
CONTARCT COMPLIANCE REVIEW
FISCAL YEAR 2014-2015**

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the May 2015 review. The purpose of this review was to assess West Covina Foster Family Agency dba Homes of Hope Group Home's (The Group Home) compliance with its County contract and State regulations and included a review of the Group Home's Program Statement as well as internal administrative policies and procedures. The review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, four placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, two of the sample children were prescribed psychotropic medication. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed three Group Home staff files for compliance with Title 22 Regulations and County contract requirements and a site visit was conducted to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

CAD found the following areas to be out of compliance.

Licensure/Contract Requirements

- Special Incident Reports (SIRs) were not submitted timely.

CAD reviewed 31 SIRs and found two were submitted late. One SIR for an incident that occurred on February 8, 2015, was submitted on February 11, 2015. Another SIR for an incident that occurred on March 21, 2015, was submitted on March 26, 2015.

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COMPLIANCE REVIEW
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The Group Home representatives were provided training on Suicide Warning Signs and SIR Reporting on April 4, 2015. A copy of the sign-in sheet was provided to CAD on July 31, 2015. CAD conducted a follow-up visit on November 4, 2015 and reviewed an additional ten SIRs and found them to be in compliance.

- Community Care Licensing (CCL) citations.

CCL cited the Group Home for deficiencies noted during an annual unscheduled visit to the Group Home on November 5, 2014. An exterior wall of the home was beginning to chip and required re-painting. CCL requested a Plan of Correction (POC) to have the wall painted. The Group Home painted the wall and the POC was cleared by CCL on July 30, 2015.

The Group Home representatives were provided with training to their staff on Facility Inspection Guidelines. A copy of the Certificate of Completion was provided to CAD on July 31, 2015. On November 5, 2015, CAD contacted CCL and confirmed there have been no new complaints or investigations from May 2015 to November 5, 2015.

Recommendations:

The Group Home's management shall ensure that:

1. All SIRs are timely submitted.
2. The Group Home is in compliance with Title 22 Regulations and free of CCL citations.

Personal Rights and Social/Emotional Well-Being

- Staff did not treat children with respect and dignity.

Two children reported that one of the Group Home staff speaks with an attitude or is rude when the staff speaks and will bob her head or wave her finger.

During the exit conference on July 1, 2015, the Group Home representatives indicated that the staff in question is the new Group Home Program Administrator who enforces the rules to ensure the children receive all the structured Program services. This new staff is strict with rule enforcement, which the children resist; therefore, the staff is perceived as being rude or having an attitude when the children have to follow the rules.

The unidentified Group Home staff was provided with training on Communication Skills which was completed on July 28, 2015. A copy of the Certificate of Completion was provided to CAD on July 31, 2015.

- A child reported not being free to attend or not attend religious services or activities.

A child stated that her identified religion is Satanism and purchased an Ouija Board. According to the child, she was not allowed to use the Ouija Board or practice Satanism in the home. This statement

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was brought to the attention of the Group Home representatives, who stated that no child has asked to practice Satanism or asked to use an Ouija Board as a part of any religious practice.

On November 4, 2015, CAD completed a follow-up visit. According to the Group Home representative, the Group Home now uses Weekly Meeting Forms to record residents' requests for activities, including a religious service requests. The residents either sign that they participated or refused to participate. A copy of the October 8, 2015 and October 15, 2015 completed Weekly Meeting Forms were provided to CAD on November 4, 2015.

- A child reported not being free to receive or reject voluntary medical, dental and psychiatric care.

A child stated that she was unaware of her right to receive or reject voluntary medical, dental and psychiatric care.

During the exit conference on July 1, 2015, the Group Home representatives stated all children receive and sign that they received a copy of their rights, when entering the Group Home. A copy of the Administration of Medication and Client Orientation for Policies and Procedures Forms signed by all residents were provided to CAD on July 9, 2015.

On November 4, 2015 CAD completed a follow-up visit. The Group Home now uses a Monthly Meeting and Attendance Form, where Policy and Procedures are discussed which include Medical/Dental/Medication Rights/Refusal and House Rules. A copy of the September 7, 2015 and October 5, 2015 completed sign-in sheets were provided to CAD on November 4, 2015.

- A child was not given opportunities to plan activities in extracurricular, enrichment, and social activities.

A child reported not receiving the opportunity to plan age-appropriate activities in the community or at the Group Home.

During the exit conference on July 1, 2015, the Group Home representatives stated all children are given the opportunity to contribute ideas during house meetings that occur monthly. A copy of the Group Home's "Resident Planned Activities" signed by all residents was provided to CAD on July 9, 2015.

On November 4, 2015, CAD completed a follow-up visit. The Group Home now uses Weekly Meeting Forms to record residents' requests for activities. The residents either sign that they participated or refused to participate. A copy of the October 8, 2015 and October 15, 2015 completed Weekly Meeting Forms were provided to CAD on November 4, 2015.

Recommendations:

The Group Home's management shall ensure that:

3. Staff treats children with respect and dignity.

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4. Children are free to attend or not attend religious services and activities.
5. Children are free to receive or reject voluntary medical, dental and psychiatric care.
6. Children given the opportunities to plan activities in extracurricular, enrichment, and social activities.

Personal Needs/Survival and Economic Well-Being

- A child was not involved with their clothing selection.

A child reported not being allowed to pick out the clothes that are bought for her. The child stated she went shopping but the Group Home Administrator picked out all of her clothes.

An exit conference was held on July 1, 2015, the Group Home representatives stated that the children are taken shopping and are directly involved with the selection of clothes that are purchased.

On November 4, 2015 CAD completed a follow-up visit. The Group Home representative stated that after residents go shopping for their clothes, the residents sign the receipt to verify they chose their clothes and write "I chose my own clothes" on the receipt as well.

Recommendation:

The Group Home's management shall ensure that:

7. Children are involved with the selection of their clothes.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S GROUP HOME CONTRACT COMPLIANCE REVIEW

The CAD's last report dated January 6, 2015, identified no recommendations.

At the exit conference, the Group Home representatives expressed their desire to remain in compliance with all Title 22 Regulations and contract requirements. A follow-up visit was conducted on November 4, 2015 and the Group Home had fully implemented 7 of 7 recommendations. CAD will continue to assess implementation of the recommendations during our next review. The Out-of-Home Care Management Division will provide ongoing support and technical assistance prior to the next review.

CASA ESPERANZA TREATMENT CENTER

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Pomona, California 91768

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Fax: (909) 865-3325

Facility Number #197804217

email: homesofhope@verizon.net

ADDENDUM TO CAP SUBMITTED ON 07/31/15

July 31, 2015

Matthew St. John
Children's Services Administrator I
Department of Children and Family Services
Contracts Administration Division - Contracts Compliance Unit
3530 Wilshire Blvd, 4th Floor
Los Angeles, CA 9001

**RE: Casa Esperanza Treatment Center
Monitoring Review Concluded- May 11, 2015
Corrective Action Plan**

Dear Matthew St. John:

Casa Esperanza Treatment Center has received the exit summary report following the contract compliance annual review of our group home Casa Esperanza Treatment Center conducted by the Contracts Administration Division (CAD) and are submitting the following Corrective Action Plan to remediate and address the recommendation/s noted.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING: Field Exit Review# VIII:

Item#40: Do children report being treated with respect and dignity?

Finding: (1) A child stated that the group home administrator gives them "attitude" when she talks, would wave her finger, "bob" her head, and feels that the administrator treats them all like they are "stupid". The child stated the administrator has also stated "you're all lucky I haven't kicked you all out yet". (2) A child stated that the group home administrator "is rude and yells at her with an attitude".

***Casa Esperanza Treatment Center Corrective Action Plan for item #40:
Casa Esperanza Treatment Center has addressed this issue in the following manner:***

1. *Casa Esperanza Treatment Center administrator was interviewed by the Quality Assurance manager, Casa Esperanza Treatment Center denies ever giving a resident an "attitude" or waving her finger, "bob" her head. Even though administrator has denied the above stated behavior or communication, a one hour training was provided to the Casa Esperanza Treatment Center administrator regarding communication skills with the residents at the group home to make them feel that they are treated with dignity and respect (please see attachment#1 Certificate of Training for 1 hour).*
2. *In regards to making a statement "you're all lucky I haven't kicked you all out yet"- as we all know it is not the decision of the group home administrator to terminate a placement. Casa Esperanza Treatment Policy has been that a placement is terminated after exhausting all resources and interventions that the group home can provide to the resident. Furthermore a TDM meeting is held with the CSW, group home social worker, any mental health providers before a team decision is made about the termination of a placement. To ensure that residents understand the placement termination process, effective August 2015, Casa Esperanza Treatment Center is starting a Monthly Discussion of Casa Esperanza Treatment Center Policies & Procedures and House Rules with the residents of the group home (please see attachment #2- Monthly Discussions of Casa Esperanza Treatment Center Policies & Procedures and House Rules with Residents of Casa Esperanza Treatment Center). The purpose of this monthly discussion will be to discuss and help the residents understand any policy, procedure and or house rule that a resident/s did not understand at the time of intake/ placement and orientation. All residents that participate in this meeting will sign the monthly discussion sign in sheet, if any resident refuses to participate in this monthly discussion then that resident will sign "Refused" next to their signature or a staff member will write 'Refused' if the resident refuses to sign. If a resident cannot participate due to other reasons other than "Refusal to sign", then that resident will have a chance next month to ask questions about any and all policies that the resident does not understand.*

Item# 43: Are children free to attend or not to attend religious services and activities of their choice?

Finding: The child stated that she is not allowed to practice her religion "Satanism" and use her "Ouija Board" in the home because it is against the administrator's religion. According to the Group Home Administrator, no request by a child has been made to practice Satanic Worship or to purchase a "Ouija Board".

Casa Esperanza Treatment Center Corrective Action Plan for item#43: *Per phone conversation with Ms. Diana Flaggs dated May 12, 2015 and an email conversation dated May13, 2015 (please see attachment#3-Email dated May 13, 2015 between Ms. Diana Flaggs and Dr. Sidhu). Per request by Ms. Diana Flaggs, the group home administrator Wanda Prince made a statement dated May12, 2015 and May 13, 2015, denying any approach by the group home resident for permission to practice Satanic Worship including the permission to buy Ouija Board (please see attachment #3 a and 3b- Statement by Wanda Prince dated May 12, 2015 and Statement by Wanda Price dated May 13, 2015).*

At the time of intake/placement all residents are provided with Casa Esperanza Treatment Center Policies and Procedures and House Rules. After reviewing these documents, all residents sign a Policy and Procedure Acknowledgement. Religious Practices is part of all the policies and procedure that the residents go through during intake/placement and Orientation time. To further ensure Casa Esperanza Treatment Center is going to hold a Resident Weekly Activity Planning Meeting. Activities to be included will be Recreational and Religious. Any Religious activity that an individual resident wants then that will be accommodated in accordance to group home Religious Services and Activities as outlined in the Program Statement of Casa Esperanza Treatment Center. This Weekly Planning Activity will start from August 2015, and a sign in sheet is prepared for all the residents and staff. All residents that participate in this meeting will sign the Resident Weekly Activity Planning Sheet (please see attachment#4-Resident Weekly Activity Planning Sheet). If any resident refuses to participate in this weekly meeting then that resident will sign "Refused" next to their signature or a staff member will write 'Refused. If a resident cannot participate due to other reasons other than "Refusal to sign", then that resident will have a chance next week to participate in this weekly activity planning meeting.

Item#46: Are children free to receive or reject voluntary medical, dental and psychiatric care?

Finding: The child stated that she did not know that she could reject voluntary medical, dental and psychiatric

Casa Esperanza Treatment Center Corrective Action Plan for item #46:

At the time of intake/placement and during orientation, all residents sign the acknowledgment of Administration of Medication Policy, which explains to them "You have the right to refuse any and all medications prescribed for you". It is also the practice of Casa Esperanza Treatment Center that if a resident refuses a prescribed medication then an SIR is done which is cross reported to CSW, OHCMD and CCL within 24 hours of refusing the prescribed medication. In addition to submitting an SIR, resident is also asked to sign on DCFS Form 561 that the resident is refusing to take the medication, this signature is witnessed by the group home staff. This document is then filed in the residents file at the group home.

Again to ensure that all residents understand Casa Esperanza Treatment Center's policies & procedures and house rules as stated above starting August 2015, Casa Esperanza Treatment Center is going to hold a monthly meeting with all the residents to discuss the policies & procedures and house rules. The purpose of this monthly discussion will be to discuss and help the residents understand any policy, procedure and or house rule that a resident/s did not understand at the time of intake/placement and orientation. All residents that participate in this meeting will sign the monthly discussion sign in sheet, if any resident refuses to participate in this monthly discussion then that resident will sign "Refused" next to their signature or a staff member will write 'Refused" if the resident refuses to sign (please see attachment# 2). If a resident cannot participate due to other reasons other than "Refusal to sign", then that resident will have a chance next month to ask questions about any and all policies that the resident does not understand.

Item# 47: Are children given opportunities to plan in age-appropriate, extra-curricular, enrichment, and social activities in which they have an interest, at school, the community or at the group home?

Finding: The child answered no that she is not given the opportunity to plan activities.

Casa Esperanza Treatment Center Corrective Action Plan for item #47:

Even though all activities are planned with the participation of all the residents based on their interest, season and holidays, but to address this finding, Casa Esperanza Treatment Center is going to hold a Resident Weekly Activity Planning meeting. The outcome of the planned activities will be added to the Group Home Monthly Activity Calendar that is posted in different areas of the group home. This Weekly Planning Activity will start from August 2015, and a sign in sheet is prepared for all the residents and staff to sign it. All residents that participate in this meeting will sign the Resident Weekly Activity Planning Sheet (please see attachment#4-Resident Weekly Activity Planning Sheet). If any resident refuses to participate in this weekly meeting then that resident will sign "Refused" next to their signature or a staff member will write 'Refused'. If a resident cannot participate due to other reasons other than "Refusal to sign", then that resident will have a chance next week to participate in this weekly activity planning meeting.

LICENSURE/CONTRACT REQUIREMENTS:

Field Exit Review# I.

Item# 4: Are all Special Incident Reports (SIRs) appropriately documented and cross-reported timely? (SAFETY)

Finding: SIR# 405059 was submitted late.

Casa Esperanza Treatment Center Corrective Action Plan for item#4:

The group home staff was re-trained on timely reporting of SIR's. (Please see the attachment# 5 Education and In-service Training Sign-in Sheet). The purpose of this re-training Special Incident Reporting Guidelines was to ensure that the staff is aware and understands the necessity to report all incidents in a timely manner.

Item#9: Is the group home free of any substantiated Community Care Licensing complaints on safety and /or physical plant deficiencies since the last review?

Finding: There was one physical plant deficiency finding during an "annual visit" by CCL on November 5, 2014 for an exterior wall to be painted. The wall was painted and the deficiency was cleared.

Casa Esperanza Treatment Center Corrective Action Plan for item#9:

Even though Casa Esperanza Treatment Center took care of the deficiency that CCL found during their annual visit to the group home. Casa Esperanza has retrained the facility manager who is in charge of the facility. Facility manager is required to log in to the facility log on a daily basis if any maintenance/repairs are needed at the group home. If there is any need of any maintenance/repairs, the facility manager will immediately inform the management so that the physical plant can be safe and in compliance with

CCL guidelines and requirements (Please see attachment #6-Certificate of Training). Please also see attached the CAP approval by CCL for the above stated deficiency (Attachment#7).

Item# Are children, appropriate to their developmental level, involved in the selection of their clothing?

Finding: The child stated that she is not allowed to pick out her clothing to purchase, that the group home administrator picks them out.

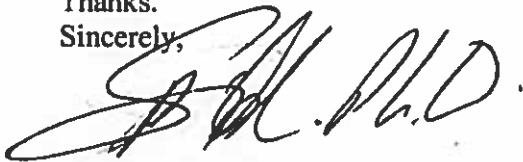
Casa Esperanza Treatment Center Corrective Action Plan for item#51:

The routine process of the group home for clothing shopping is that the child is accompanied by a child care worker or the facility manager for clothing shopping. Group Home administrator never goes for clothing shopping with the residents. To ensure that in future no such incident occurs, after each resident shops for their clothing, they will be required to sign on the clothing receipt that the shopping is selected by them. Group home staff will also be trained on not to select any clothes for the residents.

Mr. St. John it was a pleasure working with you during your monitoring review field visit of May 2015. In a continuing effort to diligently pursue the goals of Safety, Permanence, and Well-Being for the children and youth that we serve in partnership with the Department of Children and Family Services, it is the sincere intention of Casa Esperanza Treatment Center to meet all contract requirements and fully support the collaborative efforts to meet the needs of LA County's dependent children and provide a quality care to our children in placement.

If any further information is needed, please contact me anytime at (626) 814-9085.

Thanks.
Sincerely,



Pritpal Sidhu PhD
Administrator
Homes of Hope Foster Family Agency
Ph: (626) 814-9085
Fax: (626) 814-2276
Email: admin@homesofhopeffa.com